

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND. DEP. IND. DEP. IND. DEP.
1	/						51	
2		/					52	
3							53	
4		/					54	
5	/						55	
6	/						56	
7	/						57	
8		/					58	
9	/						59	
10		/					60	
11		/					61	
12		/					62	
13	/						63	
14	/						64	
15	/						65	
16		/					66	
17	/						67	
18	/						68	
19	/						69	
20	/						70	
21							71	
22							72	
23							73	
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26							76	
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40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	12	↓		↓		↓	TOTAL IND.	↓
TOTAL DEP.	8	←		←		←	TOTAL DEP.	←
TOTAL CLAIMS	20						TOTAL CLAIMS	

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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